

# Allergy Testing Information and Consent Form

Your doctor or provider has determined that skin testing of common inhaled allergens (allergic triggers) will be helpful in treatment of your sinus, nasal, throat or ear symptoms. Tree, grass and weed pollens common to our region will be tested in addition to a wide variety of mold spores, and household irritants like dust, dust mites, and pet dander. If suspected, food allergies are evaluated as well. Separate blood test may be required if serious or life-threatening food reactions are suspected.

## Why Test for Allergies?

Testing allows us to determine how likely it is that inhaled allergens play a role in your symptoms. Some conditions like non-allergic rhinitis, food allergy, infection or gastric reflux may produce symptoms identical to allergic rhinitis and can be difficult to distinguish without testing. Another important reason for testing is identification of your specific allergic triggers. Identifying your triggers is critical for serious allergy sufferers since one of the keys to effective treatment is AVOIDANCE. Testing is also the first step in formulating an alternative therapy to traditional allergy medications called immunotherapy, which may offer effective long-term suppression of allergic disease.

## How is Skin Testing Performed?

Skin testing is done in three steps and each step uses different techniques. The first step is called the initial screen skin prick test and involves the application of two Multi-Test devices to one lower arm. The devices have no needles and do not break the skin. A total of 14 allergens are placed on the skin as well as a small amount of histamine to make sure your skin is capable of producing a normal, visible skin reaction. Skin reactions are measured after 20 minutes. Itching, redness and wheals (small, itchy lumps) indicate sensitivity to a particular allergen or a normal response to histamine. If no response is seen to histamine, the test cannot be interpreted and your insurance will not be billed. The most common reason for lack of histamine response is use of antihistamines or medications that block the normal histamine response. You will be given a list of medications that may interfere with testing. Be sure to alert us if you are taking one of these. If all the allergens in the initial screen are negative, then the second step is omitted and we will proceed to the third step as well as consider testing for food allergies.

The second step in skin testing is called the extended skin prick test and involves the application of four Multi-Test devices to the other upper and lower arm. It is basically the same process as the initial screen but just tests for more detailed allergens. A total of 32 allergens are placed on the skin. Skin reactions are measured after 20 minutes.

The third step in skin testing is called intradermal testing. This allows us to figure out precisely your degree of sensitivity to an allergen that produced a skin reaction on the prick test. It is also a more sensitive test that can tell us if you really are sensitive to an allergen that had little or no reaction on the prick test. Intradermal testing involves injection of a very small volume of each of the allergens into the skin to make a tiny lump (less than ¼ inch). This is similar to the skin test for Tuberculosis, called a PPD test. We then measure the skin reaction to each of the allergens in 10 minutes. We usually do this second step for people with severe allergic or sinus conditions, people who have not responded to allergy medications, people who are interested in allergy shots or drops, or if we really suspect allergies but have a negative prick test.

## **Are there Any Side Affects to Skin Testing?**

Skin testing is not painful and usually well tolerated other than itching and redness. We will provide a soothing cream for your arm after the test. Occasionally large responses may take a few hours to clear. Rarely, they may take a couple of days to clear. Let us know if a delayed reaction occurs (a wheal that develops after 2-3 days where one was not seen before). Wheezing, cough and flaring of allergy symptoms are possible with testing, especially if large skin reactions were seen. People taking beta-blockers or asthmatics are more likely to have these severe reactions.

## **Who Should *Not* Have Allergy Skin Testing?**

If you are taking beta-blockers (like Toprol, Metoprolol, Inderal, Atenolol) for blood pressure control or a heart condition or have asthma that is difficult to control (frequent wheezing, shortness of breath or frequent inhaler usage) you should not undergo skin testing because of the increased risk for a severe allergic reaction called anaphylaxis. Blood tests should be done instead.

## **Consent Statement**

I have read and understand the purpose of allergy testing, the testing techniques used and the risks involved as described above, and I am interested in proceeding.

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Patient Name (or Parent/Guardian of Minor)

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Patient (or Parent/Guardian) Signature Date

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Physician Signature Date